REQUEST FORM FOR UNDERLOADING/ OVERLOADING OF SUBJECT

Name: _____ Student Number: _____

Degree/Program, Major: _____

Year Level: [ ] First [ ] Second [ ] Third [ ] Fourth [ ] Other _____

Semester and Academic Year of Underloading: _____

Total Units Enrolled This Semester (excluding PE and NSTP): _____

Reason for Underloading/Overloading:

[ ] **Last semester in PCB, no other subjects to enroll** (Student must submit updated curriculum checklist)

[ ] **Health** (Student must submit medical certificate, confirmed by the University Health Service)

[ ] **Employment** (Student must submit copy of payroll and appointment papers indicating, among others, the duration of employment)

[ ] **Graduating** (Student must submit updated curriculum checklist)

[ ] **Others** (Please specify)

_____

*I understand that my underloading – unless it is during my last semester in the program or it is due to health reasons, unemployment, or unavailability of subjects – is **grounds for my disqualification from Latin honors**. Further, I understand that the supporting document for the reason of my underloading must be submitted **during the semester of underloading**; otherwise, my underloading may not be justified.*

_____
(Signature over Name of Student)
Date: _____

Noted:

_____
(Signature over Name of Adviser)
Date: _____

Note: For online submission of this form, please name your file using this format:
<LAST NAME, FIRST NAME>_Notice of Underloading_<Semester and Academic Year>